

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90060 011 ****61.25

DOCUMENT # 721335 1. Entity Name HIDDEN HARBOR CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 2319 N ANDREWS AVENUE FORT LAUDERDALE, FL 33311			Mailing Address C/O RMS ACCOUNTING 2319 N ANDREWS AVENUE FORT LAUDERDALE, FL 33311		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1489169	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BECKER & POLIAKOFF, P.A. 3111 STIRLING ROAD FORT LAUDERDALE, FL 33312			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to: Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAVROVSKY, STEVE 333 NW 17 CT #308 FT LAUDERDALE, FL 33311	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mike Merrill 1775 N. Andrews Sq #106W Fort Lauderdale, FL 33311
				☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DELOREY, DIANE 1775 N ANDREWS SQ #309W FT LAUDERDALE, FL 33311	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Robb Hurlock 1775 N. Andrews Sq. #208W Fort Lauderdale, FL 33311
				☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RESNICK, STAN 1775 N ANDREWS SQ #209W FT LAUDERDALE, FL 33311	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Howard Fine 1785 N. Andrews Sq. #E210 Fort Lauderdale, FL 33311
				☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATTHEWS, JOSH 1775 N ANDREWS SQ #201W FT LAUDERDALE, FL 33311	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Bill Knowles 1750 NW 3rd Terrace #108 Fort Lauderdale, FL 33311
				☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ADAM, NANCY 1750 NW 3RD TERRACE #102 FORT LAUDERDALE, FL 33311	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Robert Ciaccia 1750 NW 3rd Terrace # 207 Fort Lauderdale, FL 33311
				☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARKER, BRUCE 333 NW 17TH CT # 305 FORT LAUDERDALE, FL 33311	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mark Massimino 333 NW 17th Ct. 109 Fort Lauderdale, FL 33311
				☐ Change ☒ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
4/10/08 Date 954-563-1269 Daytime Phone #					